								Application or Docket Number				
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2001								. l	10-0	71	182	
CLAIMS AS FILED - PART I									ENTITY			7 77 1 4 4 4
_		CLAMO		(Column 1)		(Column 2)		E		OR	SMALL	R THAN ENTITY
TOTAL CLAIMS			23				R	ATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FE	₹ 370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			23 minus 20=		· 3		×	\$ 9=		OR	X\$18=	54
INDEPENDENT CLAIMS			4 minus 3 =		* /		×	42=		OR	X84=	84
М	JLTIPLE DEPE	NDENT CLAIM F	RESENT				+1	40=		OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TC	TAL	-	OR	TOTAL	878
CLAIMS AS AMENDED - PART II										<b>-</b>	OTHER	
11	12/04	(Column 1)	takit or saas	(Colur		(Column 3)	SN	ALL	ENTITY	OR 1	SMALL	ADDI-
NTA		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA	. R/	TE	ADDI- TIONAL FEE		HATE	TIONAL
AMENDMENT A	Total	. 31	Minus	# J	3.	= 8	X	9=		OR	X\$18=	144
	Independent	* 4	Minus	*** '	1		X	2=		OR	X84=	
	FIRST PRES	ENTATION OF M	OLTIPLE DEI	PENDENT	CLAIM	' <del>إــــكاــــن</del>	+14	10=		OR	+280=	
							ADDII	OTAL FEE		OR	TOTAL ADDIT. FEE	14400
	•	<u></u>					<u>,                                      </u>					
AMENDMENT B	garan e in	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADD!- TIONAL FEE
	Total	*	Minus	**		=-	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***	01.411.1	=	X4	2=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+14	0=		OR	+280=	
								OTAL FEE	·	OR ,	TOTAL ADDIT. FEE	
ADDIT. FEE ADDIT. FEEL (Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	EST BER OUSLY	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DME	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X4:	2=		OR	X84=	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+280=	
* H	"If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									OR A	TOTAL ODIT. FEE	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												